



PART B - FEE(S) TRANSMITTAL

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22896 7590 04/20/2004

MILA KASAN, PATENT DEPT.
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850 LINCOLN CENTRE DRIVE
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Mila T. Kasan	(Depositor's name)
<i>Mila T. Kasan</i>	(Signature)
July 20, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/627,753	07/28/2000	Kenneth J Livak	4264C5	2446

TITLE OF INVENTION: HYBRIDIZATION ASSAY USING SELF-QUENCHING FLUORESCENCE PROBE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	07/20/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
RILEY, JEZIA	1637	435-006000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

- David J Weitz
- Vincent M Powers
-

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Applera Corporation

Foster City, California

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee
- ☒ Advance Order - # of Copies 5

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 01-2213 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

(Date)

Vincent M Powers

7-20-04

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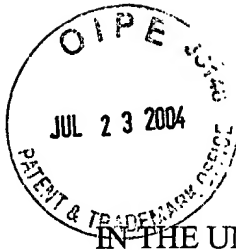
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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07/26/2004 RNEBRAH1 00000071 012213 09627753

01 FC:1501 1330.00 DA
02 FC:8001 15.00 DA

TRANSMIT THIS FORM WITH FEE(S)



Case No. 4264C5

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Livak et al.

Application No.: 09/627,753

Filed: July 28, 2000

For: **Hybridization Assay Using Self-Quenching Fluorescence Probe**

Confirmation No. 2446

) Group Art Unit: 1637

) Examiner: Jezia Riley

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Attention: Mail Stop: ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on	
<u>July 20, 2004</u>	(Date of Deposit)
<u>Mila T. Kasan</u>	Name of Depositing Party
<u>[Signature]</u>	Signature

ISSUE FEE TRANSMITTAL

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Sir:

Per the Notice of Allowance mailed April 20, 2004, please charge the issue fee of \$1,330.00 and advance order fee for \$15.00 (for a total of \$1,345.00) for the above-referenced case to **Deposit Account No. 01-2213 (Order No. 4264C5)**.

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR § 1.16 and 1.17, or credit overpayment to **Deposit Account No. 01-2213 (Order No. 4264C5)**. A **duplicate of this sheet is enclosed.**

Respectfully submitted,

Date: July 20, 2004

Vincent M. Powers
Vincent M. Powers, Reg. No. 36,246
Attorney for Applicants

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